



*CBER Centennial:
Issues in Therapeutics Research*

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OTRR Regulates Products of Emerging/Evolving Technologies

- ❖ Monoclonal antibodies
- ❖ Recombinant proteins
- ❖ Gene therapy
- ❖ Cell and tissue therapies



Monoclonal antibodies

- ❖ Rapidly evolving production, e.g., phage libraries, transgenic plants
- ❖ Engineering, e.g.,
 - Humanization
 - Chelation: radioimmunotherapy
 - Replacement of variable regions with biological receptors
 - Immunotoxins.



Recombinant proteins

- ❖ Rapidly evolving production, e.g.
 - Transgenic plants, animals
 - PEGylation, mutations
 - Serum free production
 - Protein free formulation



New therapeutic targets, e.g.,

- ❖ Angiogenesis
- ❖ Tolerance induction
- ❖ Signal transduction
- ❖ Oncogenes, growth factor receptors
- ❖ Protection from radiation injury
- ❖ Anti-bioterrorism agents



Gene therapy

- ❖ Newly developed vectors
- ❖ Targeting strategies
- ❖ Regulating strategies



Cell and tissue therapies, e..g.

- ❖ Hematopoietic stem cells
- ❖ Embryonic stem cells
- ❖ Expanded lymphocytes
- ❖ Assisted reproductive technologies
- ❖ Tissue engineering
- ❖ Pancreatic islet cells
- ❖ Hepatocytes
- ❖ Cartilage
- ❖ Xenotransplantation



Complexity of reviewing products of new technologies is often rather high

- ❖ More manufacturing concerns and issues
 - e.g., comparability, manufacturing changes
 - Less experience regarding process concerns/controls
- ❖ New indications and modalities
 - Lacking validated animal models
 - Lacking validated endpoints
 - Less prior advisory committee guidance
 - No track record of what works and what does not
 - Harder to predict long term safety concerns



Regulation of new and evolving technologies

- ❖ Requires extensive state-of-the-art scientific input for:
 - Applications review
 - Developing regulatory frameworks
 - Providing scientific and regulatory guidance



Science-based regulation of new and evolving technologies

- ❖ Broad Outreach for Scientific Input
 - Workshops, hearings, advisory committee meetings, scientific meetings, international meetings, draft guidance for comment
- ❖ In-house, state-of-the-art scientific/medical expertise
- ❖ Research/reviewers play a key role.
 - To generate critical data
 - To apply state-of-the-art expertise
 - To apply hands-on experience with technologies

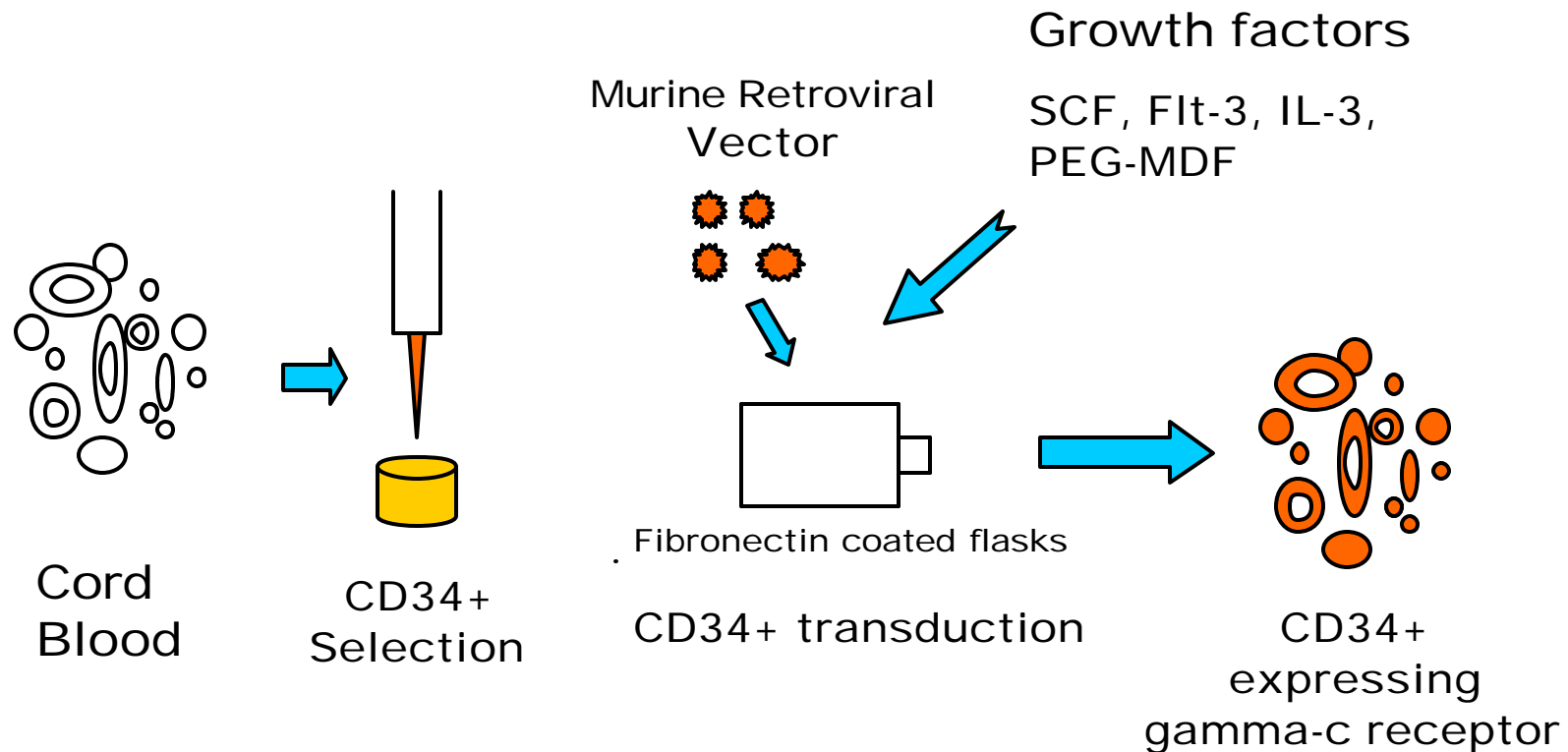


Selected issues in biotechnology therapeutics development currently addressed by OTRR, CBER

- ❖ Developing regulatory frameworks
 - definitions, regulations, guidance, etc.
 - xenotransplantation, cell/tissue therapies, etc.
- ❖ Concomitant development of targeted therapies and diagnostics (e.g., proteomic or genomic)
- ❖ Immunogenicity
- ❖ Product consistency, manufacturing changes

Complexity of (a) Gene Therapy Product

Ex Vivo Transduced CD34+ Cells
Expressing GammaC-R for X-SCID





Policy and guidance development

- ❖ Gene Therapy
- ❖ Cell Therapy and Tissues
- ❖ Xenotransplantation
- ❖ Recombinant Proteins
- ❖ Monoclonal Antibodies
- ❖ Transgenic Plants
- ❖ Clinical Data Requirements - General
- ❖ Clinical Data Requirements - Disease Specific



Immunogenicity

- ❖ Loss of efficacy, change in PK, serum sickness, neutralization of endogenous homologue (tPO)
- ❖ The EPO story
 - 1998: Eprex mfg changes approved outside U.S.
 - Includes new HSA free formulation
 - Pure Red Cell Aplasia
 - Neutralizing antibodies to endogenous erythropoietin
- ❖ Some suggested potential risk factors
 - Differences in structure or presentation, denaturation, microaggregation, subcutaneous use, competence of host, intermittent use.

Comparability, manufacturing changes

- ❖ Biological products are difficult to manufacture consistently and difficult to characterize fully.
- ❖ The ability to produce a consistent, quality product is often the rate-limiting step in getting to market.
- ❖ Changes in production or formulation have often, unexpectedly, changed products.
 - early process changes: cell bank, fermentation
 - new facilities, suppliers, processes
 - formulation changes
 - ◆ pre-filled syringe (changes in: PK, stability, microaggregates)



Proteomics / Genomics

- ❖ Impact on therapeutics development and regulation:
 - New therapeutic targets
 - New diagnostics, subpopulations, indications
 - New markers for toxicity
 - New endpoints for efficacy
 - New endpoints for potency
 - New assays for product quality, e.g., identity, purity



Regulatory research proteomics and genomics

❖ Proteomics

- Identification of early serologic markers of drug induced cardiotoxicity
- Evaluating use of proteomic tools to evaluate product purity and consistency

❖ Genomics

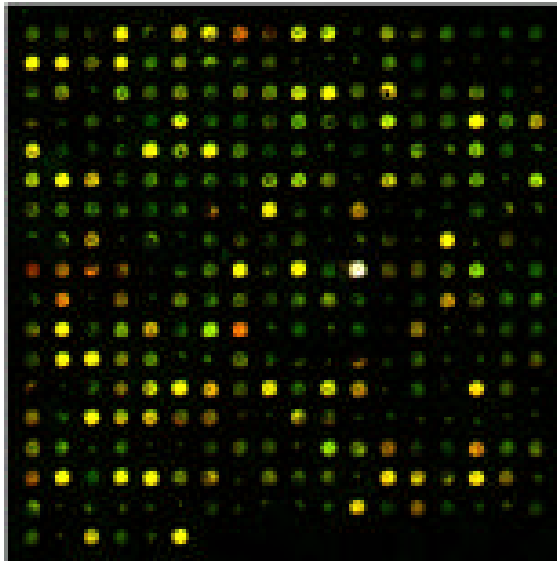
- Genomic characterization of cell substrates.



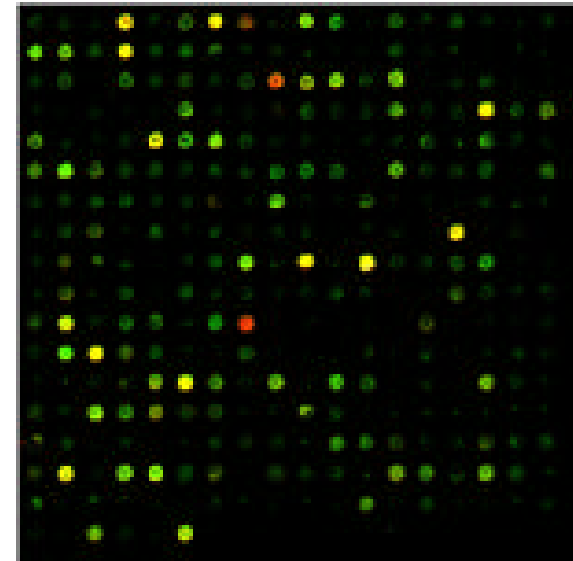
Quality assessment of cell substrates by cDNA microarray

(293 embryonic kidney cell line used to produce Ad vector)

90% Confluence



Over confluence



Up regulation of stress-related genes in over confluent cells:

P4HA1, procollagen-proline; TXNIP, thioredoxin interacting protein; ALDOA, aldolase A; ENO2, enolase 2; LDGA, lactate dehydrogenase A



Retroviral safety

- ❖ Retroviruses are present in many mammalian producer lines and cellular products
- ❖ Species-restricted viruses could develop human tropism and pathogenicity from
 - mutation, recombination, phenotypic mixing
- ❖ CBER research
 - Clearance of murine retrovirus in monoclonal antibody production
 - Porcine endogenous retroviruses (PERV) in xenotransplantation



PERV research

❖ Risk assessment

- infectious PERV can be isolated from activated pig peripheral blood mononuclear cells and plasma.
- studies into factors regulating infectivity.

❖ PERV assessment tools

- Sensitive, quantitative, specific PCR assays
- Optimized reverse transcriptase detection
 - ◆ Conventional, PCR-based (TM-PERT)
- Pseudotype assays for virus infectivity
- Western blot for detection of viral proteins or antibodies to PERV



Clinical research

- ❖ Division of Clinical Trial Design & Analysis:
Experts in medicine and the science of clinical research have greatly facilitated clinical product development in many areas.
 - Sepsis
 - Acute MI
 - Gene therapy / good clinical practices
 - Many others, e.g., rheumatoid arthritis, lupus, coronary interventions, hepatitis C, psoriasis, hematopoietic support and transplantation, Crohn's disease. wound healing.



Why research-based regulation? *(from CBER Research Oversight Report)*

- ❖ 1. Regulators and policy makers require expert knowledge and first hand experience with the latest technology being applied to biological products
- ❖ 2. An intramural research program is required to assess risks of new therapies, to develop assays and new approaches to increase efficacy and safety, and reduce risks.
- ❖ 3. A strong well maintained intramural research program provides the basis for a climate of science and scientific communication within CBER that enhances the ability of the Agency to recruit and retain high quality scientific staff



Why research-based regulation? (cont.)

- ❖ 4. The research program facilitates the ability of CBER to address existing regulatory issues and to anticipate future problems to keep pace with rapidly emerging and complex cutting edge technology.
- ❖ 5. The existence of an intramural research program is necessary for CBER to launch a credible emergency response to adventitious agent problems with marketed biologics.
- ❖ 6. Research based internal expertise enhances the ability of the Agency to interact productively with sister agencies (both in the US and internationally), academia and industry as a respected knowledgeable and impartial colleague.



OTRR, CBER approved products: The Biotechnology Revolution

❖ Oncology

- Herceptin (trastuzumab) breast cancer, ushers in new area of highly targeted therapy
- Rituxan (ritiximab) targets some lymphomas
- Zevalin* (ibritumomab tiuxetan), first monoclonal antibody targeted radiotherapy
- Campath* (alemtuzumab) for CML



Biologic Therapeutics Continued

❖ Hematopoietic support

- Several CSFs (Neulasta*: PEG-G-CSF) support WBC production and decrease infection risk
- Several EPOs (Aranesp*: darbepoietin) support RBC, treat anemia in cancer, renal failure
- Hematopoietic stem cell selection devices



Biologic Therapeutics Continued

Cardiology

- Fibrinolytics reduce mortality of acute MI
- ReoPro (abciximab) anti-platelet agent prevents abrupt coronary closure after coronary procedures.

❖ Infectious Diseases

- Xigris* (rhAPC): first therapy targeting severe sepsis, reduces mortality in high risk patients
- IFN alfas (PEG-IFN alpha* / ribavirin): chronic Hepatitis C
- Synagis: prevent RSV infections



Biologic Therapeutics Continued

- ❖ Pulmonary: DNase for cystic fibrosis
- ❖ Hereditary deficiencies: IFN gamma for osteopetrosis, CGD
- ❖ Gastrointestinal: Remicade (anti-TNF) - Crohn's Ds.
- ❖ Transplantation: Simulect, Zenapax (anti-IL-2R)
- ❖ Hyperuricemia in CA: Elitek* (Uricase)



Biologic Therapeutics Continued

❖ Arthritis

- Remicade (anti-TNF) - RA
- Enbrel (Fc TNF-R) - RA, JRA, Psoriatic Arthritis
- Anakinra* (IL-1RA) - RA

❖ Neurology:

- Betaseron, Avonex, Rebif* (IFNs beta): Multiple sclerosis
- tPA for stroke



The OTRR, CBER record

- ❖ Science-based regulation of biologic therapeutics at OTRR has played a central role in the development and availability of safe and effective products of biotechnology that are revolutionizing medicine.
- ❖ OTRR scientists/physicians work independently of but closely with regulated biotechnology.
 - Extraordinary number of meetings
 - Timely, science based guidance
- ❖ OTRR scientists/physicians have provided international leadership in the science-based regulation of biotechnology products.



The OTRR, CBER record (continued)

- ❖ The number of new product approvals is increasing.
- ❖ Despite the complexity and novelty of biotechnology products, review times and approval times compare favorably with those for other types of drugs.
- ❖ Biological therapeutics are often available first in the U.S.
- ❖ There has *never* been need to recall an OTRR-approved biotechnology drug due to safety concerns.